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| SCC eFile | 2016 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION | 216503412 | | | | |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Molina Healthcare of Virginia, Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street</p> <p>RICHMOND, VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 1/31/2016</p> <p>SCC ID NO: 06887228</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>10,000</td> </tr> </table> </div> </div> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> | | | CLASS | AUTHORIZED | COMMON | 10,000 |
| CLASS | AUTHORIZED | | | | | |
| COMMON | 10,000 | | | | | |
| <p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 11484 WASHINGTON PLAZA WEST SUITE 300</p> <p style="text-align: center;">CITY/ST/ZIP: RESTON, VA 20190</p> | | | | | | |
| <p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p> | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: KATHIE MANCINI TITLE: PRESIDENT ADDRESS: 11484 WASHINGTON PLAZA WEST SUITE 300 CITY/ST/ZIP/CO: RESTON, VA 20190 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 40%; text-align: center; vertical-align: top;"> <input type="checkbox"/> DIRECTOR </td> </tr> </table> | | | NAME: KATHIE MANCINI TITLE: PRESIDENT ADDRESS: 11484 WASHINGTON PLAZA WEST SUITE 300 CITY/ST/ZIP/CO: RESTON, VA 20190 | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR | |
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| NAME: JEFF D. BARLOW TITLE: SECRETARY ADDRESS: 300 UNIVERSITY AVENUE SUITE 100 CITY/ST/ZIP/CO: SACRAMENTO, CA 95825 | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| NAME: JOHN C. MOLINA TITLE: CFO ADDRESS: 200 OCEANGATE STE 100 CITY/ST/ZIP/CO: LONG BEACH, CA 90802 | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| NAME: HELGA GERGENS TITLE: DIRECTOR ADDRESS: 200 OCEANGATE SUITE 100 CITY/ST/ZIP/CO: LONG BEACH, CA 90802 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| NAME: JEAN GLOSSA TITLE: DIRECTOR ADDRESS: 11484 WASHINGTON PLAZA SUITE 300 CITY/ST/ZIP/CO: RESTON, VA 20190 | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT. | |
| /s/ JEFF D. BARLOW SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | JEFF D. BARLOW, SECRETARY PRINTED NAME AND CORPORATE TITLE |
| 1/26/2016 DATE | |
| It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing. | |